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ABSTRACT

This final report describes activities and accomplishments of Project Ta-Kos Outreach, a 3-year program to provide consultation and site-specific training for families, educators, and health care providers. Project Ta-kos, through its curriculum and training approach, was designed to increase the probability that children, ages birth through eight with special needs and their families could access services that were supportive of their preferences. The program used a family centered approach to early childhood services in multicultural and natural settings. Staff worked with community-based teams to jointly plan and determine desired outcomes. The project also provided site-specific, interagency training and consultation services using a training model based on adult learning theory. The program served 2,400 professionals and 6,000 children and their families. Individual sections of the report describe the program's goals and objectives, conceptual framework, training model, methodological and logistical problems and their solutions, evaluation, impact, and future activities. The first appendix summarizes family-centered curriculum components, including a paper entitled "Infusing Family-Centered Practices into Agency Administration" (by Patricia Parham and Patricia McMahon). The second appendix includes various evaluation materials including workshop evaluation forms and participant surveys. (DB)

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Project Ta-kós Outreach

FINAL REPORT

Early Education Program for Children with Disabilities
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PROJECT TA-KÓS OUTREACH
ABSTRACT

Project Ta-kós (a Coast Salish Indian term that suggests any decision or course of action may affect seven generations), through its curriculum and training approach, was designed to increase the probability that children, ages birth through eight with special needs and their families could access services that were supportive of their preferences. Our mission was to bring families and professionals together to increase awareness, understanding and respect for each other's needs; to provide structures for open communication, exchange of information and utilization of each other's expertise. We sought to foster a common bond between families and providers, thus enhancing the quality of life for all.

To accomplish this mission, consultation and site-specific training for families, educators and health care providers addressed theory and practice of a Family-Centered approach to early childhood services in multi-cultural and natural settings. Staff worked with community-based teams to jointly plan and determine desired outcomes. The collaborative process of identifying concerns, choosing priorities, and finding resources combined the expertise of families, providers, and their natural support networks to strengthen community capacity to provide and sustain meaningful services.

Project Ta-kós staff provided site-specific, interagency training and consultation to programs, supporting a responsive network of agencies that serve young children with special needs and their families. Using a training framework which is based on adult learning theory, participants increased their knowledge, skill and mastery of the training content. Training addressed the corresponding need for participant attitudinal change through joint efforts with family liaisons funded through the New Mexico Department of Health. Project staff provided support training and dissemination of a self-guided handbook designed to assist administrative staff and Boards of Directors in understanding and implementing a Family-Centered approach in programming, administration, and employee interactions.

Staff participated on relevant state level committees to support the adoption of family-centered policies and approaches throughout New Mexico. By the end of Year III, 2,400 professionals and 6,000 children and their families nationwide benefited from Project Ta-kós Outreach activities.

Project Ta-kós Outreach

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Gail Beam - State of New Mexico Representative

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GOALS & OBJECTIVES OF PROJECT TA-KÓS OUTREACH

Goal #1 *To provide structures for open communications, exchange of information and utilization of both family and provider expertise in order to foster common bonds between children, families, and providers and to enhance the quality of life for all.*

Obj. 1 To collaborate with parent organizations (i.e. PRO) to develop strategies and methods to promote (encourage) families and service providers to become critical and compassionate consumers of service delivery.

Obj. 2 In collaboration with a parent organization, develop curriculum for training institutes for parents, educators, and health care providers, focusing on the theory and practice of incorporating a Family-Centered approach to service delivery.

Obj. 3 Conduct training institutes for parents, educators, and health care providers, addressing the theory and practice of a Family-Centered Approach to Early-Childhood services.

Obj. 4 Provide training and consultation in the Ta-kós Family-Centered curriculum to requesting agencies in order to support a responsive network of agencies which serve young children with special needs and their families.

Obj. 5 Provide component training and consultation to public school Early Childhood (3-4 year old) programs.

Goal #2 *To develop and disseminate information on family-centered services in order to influence service delivery, policy development and accessibility of services.*

Obj. 6 Provide administrative support for agencies in implementing the Family-Centered approach to service delivery.

Obj. 7 To refine and extend the use of Project Ta-kós Outreach evaluation procedures and instruments.

Obj. 8 Assist with the development and implementation of Family-Centered policies and procedures at the state and local level by coordinating outreach efforts with the Developmental Disabilities Division, NM Department of Health; the New Mexico lead agency for implementing Part H. of I.D.E.A.

Obj. 9 Assist with the development and implementation of family-centered policies and procedures at the state level by coordinating outreach efforts with the New Mexico State Department of Education, Special Education Unit as it implements Part B, section 619 of I.D.E.A.

Obj. 10 Assist with statewide efforts to prepare individuals pursuing New Mexico Early Childhood License.

Obj. 11 Co-sponsor statewide, interdisciplinary training conference, Magic Years VII, IX, X in September 1995, 1996, and 1997 with NM Department of Education, NM Family and Infant/Toddler Program (HED), Division for Early Childhood (DEC), Maternal and Child Health Department, and Parents Reaching Out attended by more than 450 parents, professionals, administrators, health care providers, etc.

Obj. 12 Disseminate information, products, research and materials on Project Ta-kós Outreach to a variety of audiences.

Obj. 13 Project Ta-kós will address the current needs of a variety of agencies serving young children with special needs and their families.

"The term family-centered refers to a combination of beliefs and practices that define particular ways of working with families, that are consumer-driven and competency enhancing" Dunst, Johanson, Trivette & Hamby, 1991.

CONCEPTUAL FRAMEWORK OF PROJECT TA-KÓS OUTREACH

Families are the primary influence on the healthy growth and development of their children. They are the primary unit of service delivery and they act as the mediator between the child and the outside world. The family-centered approach was developed because the needs of children cannot be met in isolation from the family.

The term, family-centered, is used widely but how it is operationalized varies dramatically. McBride, Brotherson, Joanning, Widdon, and Demmit (1993), learned that most professionals practice the family-allied model described by Dunst, Johanson, Trivette and Hamby, (1991). In this model, families are viewed as agents of professionals, enlisted to implement interventions that professionals deem necessary for the benefit of the family. Even though this model has moved us away from professional-centered practices, it is still a long way from the family-centered model where family needs, desires and strengths, as they identify them, shape all aspects of service delivery.

It has been eleven years since the passage of P. L. 99-457, sixteen years since Schoor, as the chair of the Select Panel for the Promotion of Child Health, recommended family-centered health care (Shelton, Jeppson, and Johnson, 1987) and over twenty-five years since Bronfenbrenner recommended using family-centered practices to increase parent involvement in their child's early childhood program (Trivette, Dunst, Boyd, and Hamby, 1995), yet research shows that collaborative relationships with families have yet to be fully achieved. In 1987 the Project Ta-kós Demonstration Project was developed to facilitate the implementation of the spirit and letter of P.L. 99-457. The Project Ta-kós Outreach Projects (1991-1994 & 1994-1997) extended this work to implement a family-centered approach and to reach more families and professionals. Project Ta-kós Outreach is based on the following theoretical and conceptual framework.

Family-Centered Philosophy

The Association for the Care of Children's Health (1989) define family-centered care as a

philosophy of care that recognizes the family's pivotal role in the child's life. Project Ta-kós Outreach emphasizes this strong family-centered approach to providing services to young children with developmental delays and their families. The family-centered approach which is supported by a large body of literature, underlies all project activities and training content. The training materials are based on an ecological systems model or family systems approach (Bailey and Simeonsson, 1988; Bailey, 1987; Dunst, Trivette, and Deal, 1994; Thurman and Widerstrom, 1990) that recognizes the family as the primary context where the child's needs are best met. An ecological system model views the individual as nested in multiple interrelated environmental systems (Brofenbrenner, 1990, 1979, & 1977). The family-centered principles (Shelton, Jeppson, Johnson, 1989) that guided the project's development and implementation are:

1. Establish/maintain an adaptive fit within/between the family system and the service delivery system,
2. Provide services based on family identified needs and desires,
3. Foster family independence and empowerment while providing ongoing support systems, and
4. Recognize that families are complex, dynamic and ever changing systems.

Culturally Relevant Training and Practices

In New Mexico, family diversity implies cultural diversity because of the large number of cultures represented in the state.

> . . .personnel development efforts in New Mexico must reflect the multicultural nature of the state and must be responsive to its rural nature and geographic diversity. In order to support family-centered early intervention services in the spirit of P.L. 99-457, early interventionists must have an appreciation for the importance of family context - - family membership characteristics, socioeconomic status, cultural styles, religious affiliations, social support networks and ideological beliefs. Professionals' understanding of these elements of culture will directly affect the quality and success of services they offer to families (Beam, 1990).

Cultural sensitivity is an integral part of family-centered principles. A program cannot practice being family-centered without considering the cultural background of families in service

delivery. Project Ta-kós recognizes the family as a cultural entity involved in a dynamic, continuous developmental change process affecting the manner in which members live their lives. How beliefs and values are recognized will influence the interaction between professionals and families. By respecting those beliefs and values, the professional will acknowledge each family's informal and formal network of support, and traditional family resources and unique family styles and strengths (Luera, 1994). This acknowledgment leads to appropriate service delivery.

The following principles (Evans, Flynn, Takemoto, and Thorp, 1996) are descriptive of the Project's approach:

1. the family is the child's first and best advocate;
2. families decide what services they need;
3. programs welcome families and are shaped by families;
4. a child is first a member of a family in a community;
5. family perspectives and values are shaped by experience and cultural background;
6. family support is integral to meeting children's needs; and,
7. families and professionals must work together with mutual trust and respect.

These principles highlight the relationship of the family-centered approach and practices that acknowledge cultural diversity.

In practice, Project Ta-kós adopted the point of view that professionals must become aware of their own cultural assumptions before they can seek other perspectives of cultural authority and before they negotiate truly reciprocal interactions (Faris, 1996; Harry and Kalyanpur, 1990). Understanding the role culture plays in family interpersonal dynamics and how adults blend to form unique family life ways (Luera, 1994) facilitates a goodness-of-fit (Thomas and Chess, 1977) between intervention techniques and activities and the family's functioning style (Luera, 1994).

Inservice Training and Technical Assistance

The shift to family-centered practices presents numerous and complex challenges for professionals. Preservice personnel preparation programs are currently inadequate to meet the identified needs for trained personnel to implement family-centered practices (Fenichel and Eggbeer, 1990). We find that professionals vary radically in their exposure to and understanding

of family-centered concepts. Personnel and programs need more and continual exposure to family-centered inservice training and skill building opportunities in order to incorporate the concepts.

Building training that:

1. reflects the realities of the workplace with a focus on existing resources,
2. uses the principles of adult learning,
3. involves participants in developing outcomes,
4. gains administrative endorsement, and,
5. establishes on-going support,

ensures that training outcomes will be more long term (Winton, 1990; Winton, 1996). Important to our training approach was the joint partnership with program staff and families in developing the training outcomes they wish to see for themselves. We used the principles of modeling first described by Bandura (1977). Our approach with agencies was to model the family-centered approaches we expected participants to use. We used a process grounded in the principles that undergird the Individualized Family Service Plan, (IFSP) as described in the Individuals with Disabilities Education Act, (IDEA) Part H. In this manner, program staff and families identified their concerns, priorities, and resources to meet training needs. One program manager described the process in this way:

> *In my opinion, they are the unequivocal masters of listening to the needs, drawing upon local resources, and empowering agencies, families and communities to meet goals without interjecting their own.*

To extend this concept even further, we linked family-centered and participative management philosophies (Parham and McMahon, 1996) to training. Making the shift to family-centered agencies means changing the established patterns of practice and addressing inconsistent philosophical perspective between administrators and practitioners (Bailey, Buysse, Edmondson and Smith, 1992). In both family-centered philosophy and in participative management, participation and ownership are crucial elements of collaboration. The true test of an agency's commitment to a family-centered service philosophy lies in its willingness to define that philosophy in terms of operating procedures and then to implement them (Parham and McMahon,

1996).

If collaboration between administration, staff and families is imperative then too is collaboration between all the agencies that provide services in the same community. Building community capacity can reduce duplication of services, facilitate integrated services, reduce paperwork, and make service coordination more effective. To this end, we worked with community collaboratives and sometimes started them where none existed.

The development of methods for interagency collaboration has been influenced by the current literature, theory from multiple fields, discussions with national experts, discussions with families and our nine years of work providing training to groups. The project participated in many different levels of the system to encourage community collaboration. We participated in state groups to support state-wide initiative as well as at the community level to encourage inter-agency collaboration. We believe that collaboration must occur at all levels of the system.

DESCRIPTION FOR THE PROJECT TA-KÓS OUTREACH MODEL

The Project Ta-kós Outreach model brings families and professionals together to increase awareness, understanding and respect for each other's intentions. The training model encourages open communication, exchange of information and expertise in order to foster a common bond between children, families, and providers and to enhance the quality of life for all. Project Ta-kós Outreach contributes to the provision of services for infants and young children with special needs and their families within their local communities. Inservice training across community-based medical, social service, educational, early intervention personnel and families promotes community collaboration. Project Ta-kós Outreach builds on the training approaches developed through the model demonstration project and strengthened during outreach. The Project Outreach approach has grown from simply delivering a model to customizing our material to meet the unique needs of sites. The approach of using a family-centered IFSP process to meet training needs has a deeper impact for families, agencies, and communities than traditional component training because the training is designed to facilitate their specific outcomes. Project staff believe that this training model has national implications for the field of early intervention and in-service training. The Individualized Site Planning Sequence which depicts this process can be seen in Chart 1.

The IFSP approach to identifying needs of communities for training assures collaborative and responsive services that are based on family and community priorities. Families become better prepared to care for and advocate for their children with special needs when they have community support. Project Ta-kós Outreach staff reinforces the collaboration that must take place between parents and providers by designing training that embodies collaboration with training participants. We believe that effective training does not take place in isolation.

The Individualized Site Planning Sequence

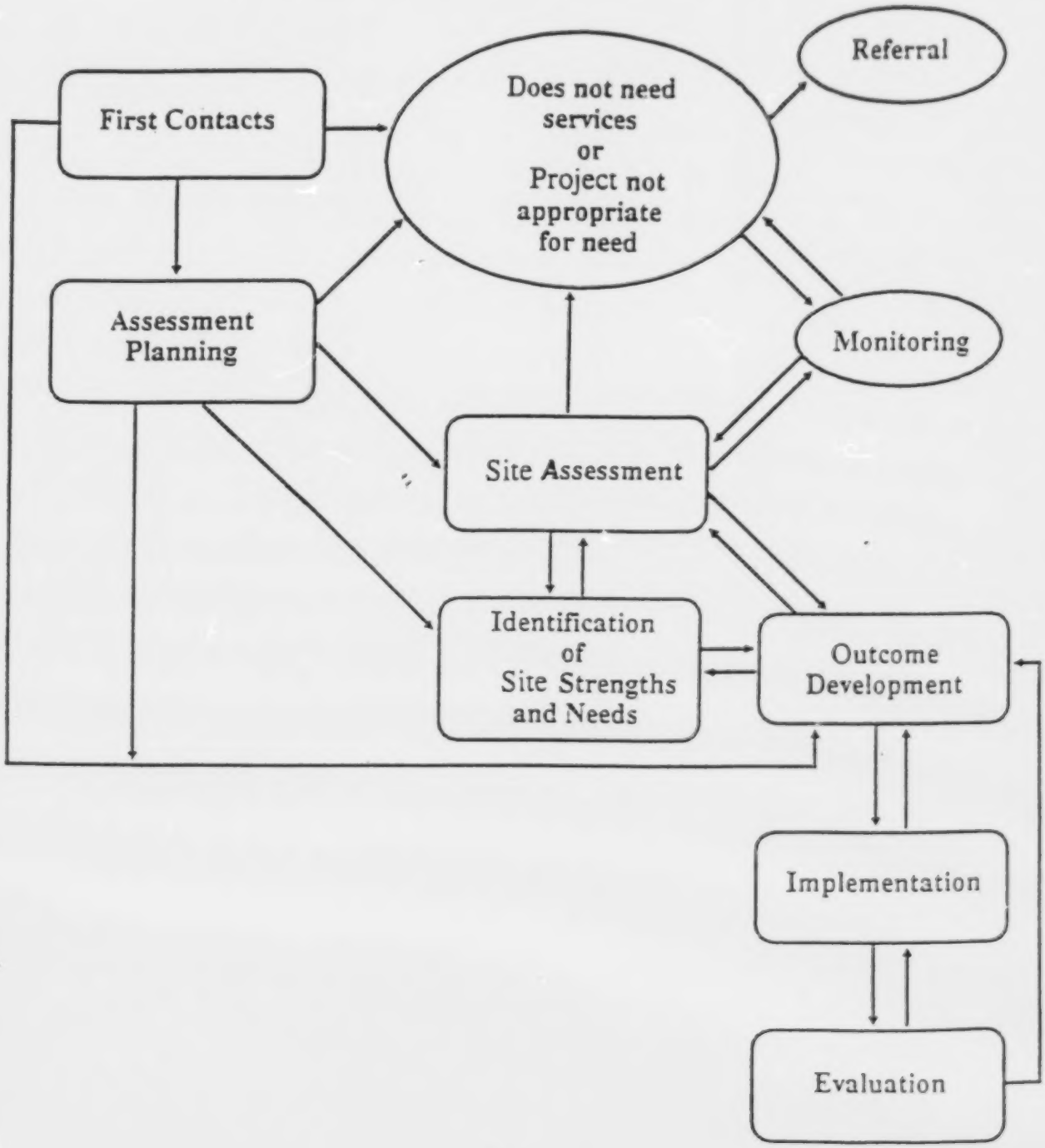

Chart 1
Adapted from "The IFSP Sequence", McGoniel, Kaufmann & Johnson; 1991

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The Project Ta-kós Outreach training model provides the following framework for training and technical assistance.

1. A well-articulated family-centered philosophy based on an ecological perspective.

2. An effective method to train parents, educational, social service, and health care personnel to develop, implement and evaluate culturally relevant, family-centered services.

3. Techniques that parents and professionals can apply to increase interagency coordination and improve the transition from birth to three year old programs to public school.

4. Methods that enable parents and professionals to share personal experiences, fostering common bonds.

5. A constructive method for families and providers to relate more successfully with young children using an integrated and inclusive developmental framework.

6. Methods to train parents and professionals together in a "proactive" approach in working with each other.

7. A model to provide effective training to varied audiences (parents, educational, social service, and health care professionals) in urban and rural settings.

8. Materials and consultation that prepare administrators to make agency changes that support staff providing family-centered services.

9. An effective training model, based on adult learner research, which is interactive, draws on the experiences and examples of the participants, and builds on a continuum of competency.

10. Application of the IFSP process to training consultation with agencies to listen, draw upon local resources, and empower agencies, families, and communities to meet their unique needs.

Table 1 explains the elements of the Project Ta-kós Outreach Model that staff used to support outreach activities with sites.

Project Ta-kós Outreach Model Contents

I. Family-Centered Curriculum:
   * Family-Centered Approach to Early Childhood Special Education
   * Another Way to View Child Development
   * Understanding Family Uniqueness through Cultural Diversity
   * Family Networking: Linking Families, Friends and Professionals
   * Transition to Public School
   * Infusing Family-Centered Concepts into Agency Administration

II. Three Phase Training Framework
   * information acquisition
   * skill acquisition
   * mastery

III. In-Service Program Planning
   * site competency
   * facilitated, collaborative process
   * identification of concerns, priorities, and resources
   * developmental
   * outcome based

IV. Continuum of Competence
   * individual and program competence
   * integration of skills and knowledge

V. Interagency Collaboration
   * developing links across and within agencies
   * promoting common experiences, expectations, and understanding
   * building community capacity for service delivery

VI. Administrative Support
   * developing a philosophical framework
   * ecology of the workplace
   * supervisor's role
   * opportunities for successful change

Table 1

Project Ta-kós Outreach Model Contents

I. All of the Family-Centered curriculum components can be utilized flexibly with a variety of audiences (parents, education and health care professionals) in a variety of settings in both urban and rural areas. During outreach, Project Ta-kós staff have adapted and updated presentations of the curriculum to reflect the changing environment in which training takes place. The typical site will now have staff with a strong understanding and belief in the elements of the family-centered approach who are working alongside staff who do not understand or who do not believe in the approach. Many sites also have other issues among staff which must be addressed prior to training. (See Appendix A for a more detailed description of the components).

Because these issues need to be addressed, project staff have developed expertise in related areas including:

organizational development
team building
communicating in teams
interagency teaming
building community capacity
community transition planning
using IFSP in public school three and four year-old programs
developing partnerships
providing family support
assessment needs
facilitation and group process
transition to kindergarten
involving fathers

II. Three-phase Training Framework

All components of the Family-Centered curriculum are delivered within the three-phase format. Interwoven throughout all training are activities to facilitate attitudinal change. Phase I training is information acquisition: primarily formal instruction with an emphasis on interactive participation. The discussion of theory specific to the topic is interspersed throughout the training. Phase II, skill acquisition, relates more directly to application of theory with children and their families. Participants are expected to learn and practice skills introduced during Phase I. Phase III, mastery, integrates theory and skills into practice.

III. Inservice Planning

Project Ta-kós models its planning with potential sites after the process used in developing the Individualized Family Service Plan. (See Chart 1.) Critical to this process is recognizing sites as competent to choose priorities from their concerns, or that they can become competent if the project supports them correctly. The identification of concerns, priorities, and resources is a facilitated collaborative process involving all parties. Sites are encouraged to determine where they are in the change process to make outcome attainment more probable and more cost effective.

IV. Continuum of Competence Concept

Fenichel & Eggbeer define competence as the "ability to do the right thing, at the right time and for the right reason...it involves the capacity to analyze a situation, consider alternative approaches, select and skillfully apply the best observation or intervention techniques, evaluate the outcomes, and articulate the rationale for each step of the process (1990)." Within a program, competence is required on two levels: (1) the skills of the individual (individual competence), and (2) the collective competence of program staff and parent experience (program competence). The three-phase framework of Project Ta-kós Outreach addresses both individual and program competence.

Programs must address both individual and program competence to meet the needs of children with special needs and their families. Competent individuals, who exchange information and make decisions about service delivery, determine the quality of services. Parents, staff members (professionals and support), administrators, board members and others who develop policy, define practices and conduct services determine program competence.

Individual competence develops along a continuum. Preservice provides a foundation of knowledge and skills. A new level of competence is acquired once professionals enter work settings and apply knowledge and skills. During the remainder of a professional's work life, inservice training provides opportunities to expand or learn new skills, knowledge and experiences. Throughout Project Ta-kós Outreach training, participants increase individual competence through discussion, practice and activities designed to meet individual needs.

Program competence is determined by staff attitudes and expertise, the family's experience with service delivery and agency policies and practices. The Three-Phase Training

Framework provides opportunities for participants to address shared concerns and agency needs. Project Ta-kós curriculum components, such as Infusing Family-Centered Practices into Agency Administration, provide information on ways to assess family-centered practices. Ongoing consultation is offered to increase the permanence of these changes.

V. Interagency Collaboration

In every training opportunity, project staff encourage the identification of other agencies in the community whose staff might equally benefit from a particular inservice. The belief is that children and their families interact with may provider agencies. Providers who talk with one another, share comparable beliefs about working with families, and who create systems which support rather than frustrate family participation are critical to improving services for young children with disabilities and their families. This is especially true if services are to be in the families' most natural or least restrictive environment. Inservice experiences which are common across agencies, are an excellent way to promote these objectives.

The process the project employs to facilitate this occurring is based on the process for developing outcomes in the Individualized Family Service Plan. It also includes grassroots involvement concepts from the community development field. The intent is to build community capacity for family-centered service provision.

VI. Administrative Support

Administrative support is critical to the success of every inservice training program. Participating staff must believe that the training is important and that the expectation exists that they will use the materials or skills addressed in the training. Staff must also believe that administration will lead the way in creating a supportive environment for this to happen.

Administration identifies the philosophical framework under which providers and families work together. If there are conflicting philosophies between the program and the direction of the inservice training, the training will not increase the program's competency in meeting children or families' needs.

Administrative support is necessary in order to allow the time and resources for enabling the program and individuals to move along the continuum of competency. Policies, procedures and staff support activities evolve not only to reflect this continuum, but to nurture and strengthen

program change.

Administrative support provides the opportunities for effective program change. "Supervision may be the single most important element of inservice training for infant/family practitioners." (Fenichel and Eggbeer, 1989). There is a need to invest those with supervisory responsibilities with the competencies to effectively teach, reinforce, assess and support those service providers who are in direct contact with infants, young children, and their families.

Project Ta-kós sets a priority of working with administrators at training sites in order that they understand the necessity of their involvement in staff development activities. Administrators are encouraged to be responsible for their role in achieving training or consultation outcomes.

Adoption Sites

Sites were chosen through mutual agreement between sites and the project to determine if our project activities would meet their needs. In some cases, we agreed to deliver short-term trainings in order to meet specific training objectives of the sites. In other situations, we developed long-term relationships with sites to meet a variety of training and technical assistance needs. (See Appendix A for Selection Criteria for Outreach).

Dissemination, Training, and Incorporation Activities

Training occurred at a variety of sites. Community programs, Head Starts, public preschools, education, and health care agencies were represented and often trained together. These joint trainings helped to support networking and collaboration between programs in New Mexico. Short-term training was presented on the following topics to 1,243 participants: A Family-Centered Approach, Family-Centered Philosophy: A Father's View, Overview of Part H Services under IDEA, Introduction to Family-Centered Practices, Infusing Family-Centered Concepts Into Agency Administration, Family-Centered IEP and IFSP, An Interactive Approach to Child Development, Process for and Individualized Education Program, Siblings Role in Special Education, Team Building, Undertaking Family Uniqueness, Transitioning Two Year Olds, From a Family's Perspective - Understanding the Early Intervention System in New Mexico, Fathers of Children with Special Needs: New Horizon, Father's Experience Raising Children with Disabilities, Community Collaboration for Transition, An Overview of the Early Childhood Technical Assistance Document, Dreaming Big Enough to Overcome the Obstacles, Promising State Activities. Please refer to the detailed charts in this Section concerning training and conference presentations for more specific information.

These activities are described in more detail in the following explanations of how project objectives were met:

Goal #1: *To provide structures for open communications, exchange of information and utilization of both family and provider expertise in order to foster common bonds between children, families, and providers and to enhance the quality of life for all.*

Objective 1: **To collaborate with parent organizations (i.e. PRO) to develop strategies and methods to promote (encourage) families and service providers to become critical and compassionate consumers of service delivery.**

Objective 2: **In collaboration with a parent organization, develop curriculum for training institutes for parents, educators and health care providers, focusing on the**

theory and practice of incorporating a Family-Centered approach to service delivery.

Objective 3: Conduct training institutes for parents, educators, and health care providers, addressing the theory and practice of a Family-Centered Approach to Early Childhood services.

An important component of the Project Ta-kós approach was the formal collaboration with Parents Reaching Out (PRO) a statewide advocacy and support network (over 1,000 members) and the New Mexico Parent Training and Information Center. Under terms of a jointly developed written contract, PRO designated one parent staff member to be a part of the Project Ta-kós team. She maintained her office at Alta Mira and was an integral part of everything the project did. Along with providing training and technical assistance this staff member actively recruited parents to both participate in Project Ta-kós training and to co-present with project staff.

One three day institute, "Implementing Family-Centered Practices Into My Work," was jointly sponsored by Project Ta-kós and PRO. Held at a Conference Center in Glorieta, New Mexico, the institute attracted 72 participants from many professional disciplines who work with young children with special needs and their families, as well as parents from throughout the state. Parents were provided with stipends based on criteria developed over many years by PRO.

See Appendix A for institute participant manual and contract with Parents Reaching Out.

Objective 4: Provide training and consultation in the Ta-kós Family-Centered curriculum to requesting agencies in order to support a responsive network of agencies which serve young children with special needs and their families.

Long-term training and technical assistance relationships were established with the following agencies:

<u>Indian Children's Program</u>

The Indian Children's Program (ICP) came to Project Ta-kós with a very open-ended request. They wanted us to help them create a common understanding of what family-centered practice would mean for them and to facilitate their incorporation of this understanding into a new

model for service.

Project Ta-kós staff led ICP staff in a discovery session to isolate issues. A plan for Project Ta-kós involvement was prepared, two activities for training emerged. Staff led an all day training on family-centered principles and practices and then helped plan an ICP staff retreat with follow-up assistance by Project Ta-kós staff.

New Mexico Department of Health: Childrens' Medical Services

As a direct outcome of the Family-Centered Institute held in Glorieta, NM (Obj. 3), the Childrens' Medical Services Nutrition Bureau asked the project to conduct family-centered training in each of their state regions. After meeting with regional nutritionists and representatives from targeted communities, day long workshops were conducted in Las Vegas, Tucumcari, and Gallup. Forty-eight (48) participants attended, including parents, health care professionals, administrators, educators, service coordinators, case managers, and early interventionists.

MORE - McKinley Opportunity and Resource Enterprises

The Director for MORE, (birth to 3 early intervention program) came to us for assistance in planning training and identifying resources to meet their needs. Some of their training needs were in the area of transition with the Gallup-McKinley County Public Schools and Head Start. We facilitated joint agency trainings on transition and on team-building. We also trained with MORE on the topic of Understanding Family Uniqueness Through Cultural Diversity.

Objective 5: Provide component training and consultation to public school Early Childhood (3-4 year old) programs.

New Mexico School for the Deaf (NMSD)

Our work with NMSD became part of an on-going relationship in which we provided a needs assessment, technical assistance, and training to NMSD staff from different parts of New Mexico. An interesting follow-up to the training included meetings between Project Ta-kós staff and NMSD staff to assess progress in the outcomes for training that they had originally identified. We worked with NMSD on a Family-Centered approach to the IEP process and trained them in

the Understanding Family Uniqueness Through Cultural Diversity curriculum.

Gallup-McKinley County Public Schools

The Project had an on-going relationship with the Gallup-McKinley County Public Schools 3-4 year old program. We provided technical assistance to the Director of the program both by telephone and face-to-face contact. The primary issue identified by Gallup was transition because of the additional agencies which are involved in this process such as the Navajo Nation Early Intervention program as well as the early intervention program, MORE. There are additional Navajo Nation Head Starts programs as well in the community planning process.

The foundation for the work with Gallup began in the previous project. We continued this work by facilitating a transition planning meeting between Gallup area agencies. This facilitated training led to a number of other trainings which included the Project Ta-kós/Project Steps training to develop a community-wide transition system. Following this training, Project Ta-kós was asked to facilitate the community process of establishing an Interagency Coordinating Council for Transition. The council provided the community agencies the opportunity for collaboration and interaction. The council's first product was to design a common form that would be accepted by all agencies so that families would not constantly have to report the same information.

State-wide Transition Training

The project collaborated with state agencies and local education agencies to provide transition training for communities around New Mexico. The training was a facilitated process to provide communities opportunities to identify their issues and the outcomes they would like to see. It is estimated that 85% of children in public schools in New Mexico were affected through this community process.

Goal #2: *To develop and disseminate information on family-centered services in order to influence service delivery, policy development and accessibility of services.*

Objective 6: Provide administrative support for agencies in implementing the Family-Centered approach to service delivery.

Project Ta-kós disseminated 64 copies of Infusing Family-Centered Practices into Agency Administration. 125 condensed versions of the material were distributed. Staff members presented information about Infusing the Family-Centered Practice Into Agency Administration at the DEC (Division of Early Childhood) meeting in Phoenix, AZ., at the Western Regional Conference for Home-Based Early Interventionists in Ogden, Utah, and to Alta Mira Specialized Family Services. Consultation regarding this material was provided to the Indian Children's Program and the New Mexico School for the Deaf.

Objective 7: To refine and extend the use of Project Ta-kós Outreach evaluation procedures and instruments.

The project changed our evaluation approach during the course of the three year grant to measure outcomes for sites more closely. The change in our evaluation approach mirrored the change of our outreach model to respond to the needs of sites in New Mexico. See the Description of the Model for an explanation of the model changes and the evaluation section for more information on how evaluation was conducted.

Objective 8: Assist with the development and implementation of family-centered policies and procedures at the state and local level by coordinating outreach efforts with the Developmental Disabilities Division, NM Department of Health; the New Mexico lead agency for implementing Part H. of I.D.E.A.

Objective 9: Assist with the development and implementation of family-centered policies and procedures at the state level by coordinating outreach efforts with the New Mexico State Department of Education, Special Education Unit as it implements Part B, Section 619 of I.D.E.A.

Project staff participated on state level committees and initiatives of the Department of Health/Developmental Disabilities Division (lead agency for Part H); the State Department of Education, Special Education Unit; and the Children, Youth and Families Department, Office of Child Development to effect systems change. The three departments are working collaboratively to develop corresponding personnel standards. Below is a list of committee participation and the

major activities of the committees.

Table 2: Committees and major activities

ICC - Services Committee (1994 - 1997)	* Draft new policies and procedures for FIT program, including definitions of services. * Assess effects of move to managed care on need to clarify language in policies. * Review respite service availability throughout state and give directions to new respite task force.
ICC - Personnel Preparation Committee (1994 - 1997)	* Develop Competencies for Early Interventionists and Service Coordinating. * Develop ECSE aspect of Career Lattice for Early Childhood (CYFD).
ICC - Transition Committee (1994 - 1997)	* Steering committee for Transition Collaborative Training. * Develop competencies.
ECTAT (1994 - 1995)	* Develop Early Childhood Technical Assistance Document.
Subcommittee on Cultural Competence Review - Dept. of Health (1997)	* Develop standards for Department of Health employees state-wide.
PIC & the Higher Education Task Force (1994 - 1997)	* Develop the Early Childhood Career Lattice. * Guide process for professionalism of early childhood field.

Objective 10: Assist with statewide efforts to prepare individuals pursuing New Mexico Early Childhood License.

We diverted from our original plan to provide training for the early childhood license because the development of career lattice that would guide the training was not fully developed until the end of the project. Therefore we participated in the development activities of this initiative.

Objective 11: Co-sponsor statewide, interdisciplinary training conference, Magic Years VII, IX, X in September 1995, 1996, and 1997 with NM Department of Education, NM Family and Infant/Toddler Program (FIT), Division for

Early Childhood (DEC), Maternal and Child Health Department, and Parents Reaching Out, attended by more than 450 parents, professionals, administrators, health care providers, etc.

Project Ta-kós co-sponsored Magic Years, a state-wide, interdisciplinary training conference from 1994 through 1997 and served on the planning committee. Project staff gave six presentations during the 1995 and 1996 conferences.

Objective 12: Disseminate information, products, research, and materials on Project Ta-kós Outreach to a variety of audiences.

Dissemination activities included presentations, publications, and a bi-annual newsletter. Presentations are listed in Table 3 in the conference list. Products and curriculum components of Project Ta-kós Outreach for dissemination are:

* Understanding Family Uniqueness Through Cultural Diversity
* Infusing Family-Centered Principles Into Agency Administration
* Another Way to View Child Development

And one bi-annual publication

* Talking Leaves

Sixty nine components were disseminated from the list above. Project Ta-kós submitted the following conference proposals in response to calls for papers: Association for the Care of Childrens Health (ACCH) - Infusing Family-Centered Concepts Into Agency Administration, Zero to Three - Yes, My Family Is Unique, Zero to Three - Dreaming Big Enough to Overcome the Obstacles, International Parent to Parent Conference - Understanding Family Uniqueness Through Cultural Diversity, ACCH - Understanding Family Uniqueness Through Cultural Diversity, Division of Early Childhood - Infusing Family-Centered Practices Into Agency Administration, Magic Years - Dreaming Big Enough to Overcome the Obstacles, and Magic Years - Yes, My Family Is Unique. Specific years are noted in the Summary of Conferences in Table 3.

Objective 13: Project Ta-kós will address the current needs of a variety of agencies serving young children with special needs and their families.

The Project sought to identify and address current needs of a variety of agencies serving young children with special needs and their families. An advisory committee was established with members representing community health, preschool, public schools, parent advocacy, human services, and university faculty. The committee met twice every year and provided valuable information, networking, review of material, and support for project staff.

See Introduction for membership list.

SUMMARY OF CURRICULUM COMPONENT TRAINING
PROJECT TA-KÓS

TRAINING			
Agency/Location	*Component*	*Date*	*No. of Participants*
Social Service Division Policy Committee: Santa Fe, NM	A Family-Centered Approach	October 20, 1994	6
Gallup-McKinley County Public Schools: Gallup, NM	Transition	February 27-28, 1995	51
NM Department of Health, Family Infant Toddler Program: Roswell, NM	IFSP Outcomes	March 30-31, 1995	48
NM Department of Health, Family Infant Toddler Program: Santa Fe, NM	IFSP Outcomes	April 6, 1995	51
NM Department of Health, Family Infant Toddler Program: Alamogordo, NM	Service Coordination	April 20-21, 1995	36
Gallup-McKinley County Public Schools, Navajo Head Start, Gallup Head Start, McKinley Opportunity & Resources Enterprises: Gallup, NM	Transition to Kindergarten	May 11, 1995	38
NM Department of Health, Family Infant Toddler Program: Taos, NM	Service Coordination	May 11-12, 1995	56
University of New Mexico, Health Sciences Center: Albuquerque, NM	Family-Centered Philosophy: A Fathers View	June 5, 1995	5

Table 3

SUMMARY OF CURRICULUM COMPONENT TRAINING
PROJECT TA-KÓS

TRAINING			
Agency/Location	*Component*	*Date*	*No. of Participants*
Teen Pregnancy Coalition: Albuquerque, NM	Overview of Part H Services under IDEA	June 15, 1995	70
3rd Regional IFSP Workshop, NM Department of Health, Family Infant Toddler Program: Albuquerque, NM	Developing IFSP Outcomes	August 25, 1995	50
Even Start, Albuquerque Public Schools: Albuquerque, NM	Introduction to Family-Centered Practices	September 15, 1995	4 staff 16 parents
Step High Program, NM School for the Deaf: Santa Fe, NM	IFSP / Service Coordination	October 7, 1995	37
3rd Regional Service Coordination Workshop, NM Department of Health, Family Infant Toddler Program: Albuquerque, NM	Service Coordination	October 19 & 20, 1995	52
Central Region Education Cooperative (CREC): Albuquerque, NM	Building Bridges for Transition	November 10, 1995	34
Alta Mira Specialized Family Services Board of Directors: Albuquerque, NM	Infusing Family-Centered Concepts Into Agency Administration	November 13, 1995	15
Gallup-McKinley County Public Schools, Navajo Headstart; Growing in Beauty, Navajo Nation: Gallup, NM	Project Steps: A Community Wide Transition System	November 29-30, & December 1, 1995	29

Table 3

SUMMARY OF CURRICULUM COMPONENT TRAINING
PROJECT TA-KÓS

TRAINING			
Agency/Location	*Component*	*Date*	*No. of Participants*
McKinley Opportunity & Resources Enterprises: Gallup, NM	Understanding Family Uniqueness Through Cultural Diversity	December 13, 1995	6
District Head Start: Albuquerque Public Schools District Diagnostic Center	Family-Centered IEP and IFSP	January 11, 1996	46
Bloomfield RCC: Bloomfield, NM	An Interactive Approach to Child Development	February 16, 1996	30 staff 12 parents
New Mexico Preschool for the Deaf: Albuquerque, NM	Family-Centered Approach to Early Childhood Special Education	March 1, 1996	17
NM Department of Health, NM State Department of Education and Parents Reaching Out, Kachina Lodge Conference Room: Taos, NM	Building Bridges for Transition	March 14-15, 1996	36 staff 3 parents
Jemez Valley High School: Jemez, NM	Individualized Education Program - Process	March 20, 1996	2 staff 4 parents
NM Department of Health, NM State Department of Education and Parents Reaching Out: Deming, NM	Building Bridges for Transition	April 10-11, 1996	38
NM Department of Health, NM State Department of Education and Parents Reaching Out: Carlsbad, NM	Building Bridges for Transition	April 25-26, 1996	36

Table 3

SUMMARY OF CURRICULUM COMPONENT TRAINING
PROJECT TA-KÓS

TRAINING			
Agency/Location	*Component*	*Date*	*No. of Participants*
Albuquerque Public Schools, District Diagnostic Center: Albuquerque, NM	Family-Centered Approach	May 1, 1996	62 staff
APS District Diagnostic Center: Albuquerque, NM	Sibling's Role in Special Education	May 17, 1996	25
Project HITOS, UNM Health Sciences Center: Albuquerque, NM	Family-Centered Philosophy: A Father's View	June 3, 1996	13
Alta Mira Specialized Family Services, Early Intervention: Albuquerque, NM	Team Building	August 21, 1996	22 staff
Project Ta-kós/ Parents Reaching Out Institute: Glorieta, NM	Implementing Family-Centered Practices Into My Work	September 4-6, 1996	56 staff 14 parents
Gallup McKinley County Schools: Gallup, NM	Transition Basics 2 - Entry Level Skills Checklist	October 18, 1996	28
4th Regional Service Coordination Workshop, NM Department of Health: Ruidoso, NM	Service Coordination	October 22, 1996	48
Gallup McKinley County Schools, McKinley Opportunity & Resources Enterprises, Growing in Beauty: Gallup, NM	Team Building to Facilitate Transition between MORE, Gallup-McKinley Schools and Growing in Beauty	November 1, 1996	14

Table 3

SUMMARY OF CURRICULUM COMPONENT TRAINING
PROJECT TA-KÓS

TRAINING			
Agency/Location	*Component*	*Date*	*No. of Participants*
Indian Children's Program: Albuquerque, NM	Family-Centered	November 3, 1996	5
New Mexico School for the Deaf Preschool: Albuquerque, NM	Understanding Family Uniqueness through Cultural Diversity	November 18, 1996	16 staff
Bethphage Missions West: Grants, NM	Understanding Family Uniqueness	November 21, 1996	22
NM Department of Health, NM State Department of Education, and Parents Reaching Out: Farmington, NM	Building Bridges for Transition	December 5 & 6, 1996	68
NM Department of Health, NM State Department of Education, and Parents Reaching Out: Albuquerque, NM	Building Bridges for Transition	January 16 & 17, 1997	58
Alta Mira Specialized Family Services ACT Team	Team Building	January 22, 1997	10
NM Department of Health, NM State Department of Education, and Parents Reaching Out: Las Cruces, NM	Building Bridges for Transition	February 6 & 7, 1997	52
NM Preschool for the Deaf: Albuquerque, NM	Family-Centered IEP	February 11, 1997	16

Table 3

SUMMARY OF CURRICULUM COMPONENT TRAINING
PROJECT TA-KÓS

TRAINING			
Agency / Location	*Component*	*Date*	*No. of participants*
Roundtree, Early Intervention: Farmington, NM	Family-Centered IFSP Process	February 14, 1997	12
NM Department of Health, NM State Department of Education, and Parents Reaching Out: Ruidoso, NM	Building Bridges for Transition	March 17 & 18, 1997	32
NM Department of Health, NM State Department of Education, and Parents Reaching Out, Luna VoTech: Las Vegas, NM	Building Bridges for Transition	May 12 & 13, 1997	23
NM Department of Health, CMS: Las Vegas, NM	Family-Centered	May 17, 1997	18 staff 2 parents
NM Department of Health, CMS: Tucumcari, NM	Family-Centered	May 30, 1997	4 staff 1 parent
NM Department of Health, CMS: Gallup, NM	Family-Centered	June 27, 1997	21 staff 2 parents
Alta Mira Specialized Family Services, Management Team	Infusing Family-Centered Practices Into Agency Administration	September 10, 1997	10

Table 3

SUMMARY OF CONFERENCE PRESENTATIONS
PROJECT TA-KOS

CONFERENCE PRESENTATIONS			
Conference	*Presentation*	*Date*	*No. of Participants*
Early Childhood Special Education Networking Conference: Phoenix, AZ	Understanding Family Uniqueness Through Cultural Diversity	November 3, 1994	17
Early Childhood Special Education Networking Conference: Phoenix, AZ	Working With Children From Diverse Families	November 4, 1994	15
Family Preservation Meeting: Albuquerque, NM	Understanding A Family-Centered Approach	November 16, 1994	28
2nd Annual Navajo Nation Child Care Conference: Farmington, NM	Building Bridges for Transition	March 11, 1995	6
Spring New Mexico CEC: Albuquerque, NM	Panel Summarizing DEC Presentations	March 16-17, 1995	21
New Mexico Faculty Institute Training Workshop: Albuquerque, NM	Family-Centered IFSP Process	March 24, 1995	23
Magic Years Early Childhood Conference: Albuquerque, NM	Transitioning Two-Year Olds: Guidelines, Timelines, and Clothesline	September 28, 1995	68
Magic Years Early Childhood Conference: Albuquerque, NM	From a Family's Perspective - Understanding the Early Intervention System in New Mexico	September 28, 1995	6

Table 3

SUMMARY OF CONFERENCE PRESENTATIONS
PROJECT TA-KOS

CONFERENCE PRESENTATIONS			
Conference	*Presentation*	*Date*	*No. of Participants*
New Mexico Speech-Language-Hearing Association: Albuquerque, NM	Understanding Family Uniqueness Through Cultural Diversity	October 27, 1995	31
Southeastern Institute Faculty Training Outreach:	Family-Centered	January 11, 12, 1996	73
San Juan County Partntership: Farmington, NM	Understanding Family Uniqueness Through Cultural Diversity	February, 16, 1996	28 staff 6 parents
National Native American Early Childhood Conference: Albuquerque, NM	Yes, My Family is Unique	March 26, 1996	45 staff 22 parents
International Parent to Parent Conference: Albuquerque, NM	Fathers of Children with Special Needs: New Horizon	March 29-April 1, 1996	111 parents, 10 profe-ssionals
University of New Mexico Grand Rounds: Albuquerque, NM	The Part H System	May 4, 1996	43
Southeastern Institute Faculty Training Outreach: Ashville North Carolina	Understanding Family Uniqueness	June 1-5, 1996	58
ACCH: Albuquerque, NM	Father's Experience Raising Children with Disabilities	June 9-12, 1996	75

Table 3

SUMMARY OF CONFERENCE PRESENTATIONS
PROJECT TA-KOS

CONFERENCE PRESENTATIONS			
Conference	*Presentation*	*Date*	*No. of Participants*
NEC*TAS, Rural Issues: Santa Fe, NM	Community Collaboration for Transition	July 16, 1996	8
Magic Years Early Childhood Conference: Albuquerque, NM	An Overview of the Early Childhood Technical Assistance Document	September 26, 1996	58
Magic Years Early Childhood Conference: Albuquerque, NM	Community Collaboration for Transition	September 26, 1996	10 staff 2 parents
Magic Years Early Childhood Conference: Albuquerque, NM	Dreaming Big Enough to Overcome the Obstacles	September 26, 1996	17 staff 4 parents
Magic Years Early Childhood Conference: Albuquerque, NM	Yes, My Family is Unique	September 27, 1996	6
OSEP / NEC*TAS, Project Director's Meeting: Washington, DC	Promising State Activities	November 7, 1996	28
DEC: Phoenix, AZ	Infusing Family-Centered Practices into Agency Administration	December 8, 1996	75
Western Regional Conference for Home Based Early Interventionists: Ogden, Utah	Infusing Family-Centered Practices into Agency Administration	July 30, 1997	27

Table 3

SUMMARY OF CURRICULUM COMPONENT TRAINING
PROJECT TA-KÓS

TECHNICAL ASSISTANCE AND CONSULTATION			
Agency / Location	*Component*	*Date*	*No. of Participants*
Regional Education Cooperative: Bloomfield, NM	Family-Centered Practices	August 11, 1995	1
Navajo Head Start and Division of Social Services: Farmington, NM	Transition	August 11, 1995	2
School for the Deaf: Albuquerque, NM	IEP, Family-Centered Practices, Understanding Family Uniqueness	January 8, 1996 & May 8, 1996	4
Gallup McKinley County Agencies and Public Schools: Gallup, NM	Transition	January 9,1996, February 9, 1996, March 8, 1996, & April 12, 1996	60
Indian Children's Program: Albuquerque, NM	Family-Centered Practices	September 20, 1996 & October 4, 1996	10

Table 3

METHODOLOGICAL AND LOGISTICAL PROBLEMS

Our project training model evolved during the three years of the project. Although our training was still based on the original material and research, we found that the original three-phase training model was not practical to meet the needs of sites. We used our original material to customize training which was meaningful to sites and meet the outcomes that they desired. In some cases, sites asked if we could work with them on something in addition to our curriculum materials. For example, we were asked to help with team building during the transition training because it was one part of the transition process.

We found while working with different agencies that they did not operate in a vacuum. Their ability to make changes and serve families better was often impeded by community issues. Project staff realized the need for facilitating community development in order to achieve community outcomes. Our team feels that this approach has been very successful in meeting the needs of sites as a family-centered training group; much as we would hope sites customized services to meet the needs of families.

A much anticipated opportunity in the project was to have a staff member from Parents Reaching Out (PRO) as a full team member. The recruiting and hiring of this person took longer than expected and delayed some activities. In the second year of the project this person left her position at PRO and another person was recruited and hired. In May of 1997 this person took a different position with PRO and left Project Ta-kós.

This lack of continuity and decreased time of the PRO staff person on Project Ta-kós had several effects. First, the amount and quality of input from the PRO parent into project planning and activities was reduced. Second, parent participation in training was less than originally expected. Third, the opportunity for this parent to learn and present Project Ta-kós material was limited. Fourth, communication and coordination with PRO never stabilized. To compensate for this loss, other Project Ta-kós staff increased their workload and time to meet training commitments. In addition, we involved family members from the sites who participated in our training and asked the parent liaisons funded by our lead agency for Part H to participate in many of our training events. Because one project staff member is a parent and one is a sibling and legal guardian of an individual with a disability, they brought an additional family experience to training

and workshop development.

One objective which was significantly affected was the plan for family-centered institutes. We had originally planned multiple institutes, but were only able to coordinate one with PRO in the original format that we had hoped for. The planning and coordination of these institutes was to be a big part of the PRO staff members' work. Without this constant link between the two agencies, progress was often sporadic. During this period of time, PRO was host to the International Parent to Parent Conference held in Albuquerque. The almost overwhelming amount of time and energy this required drew significantly away from what they had originally planned to devote to co-sponsoring the Institute.

For the institute that we did co-sponsor, PRO staff involved a much broader group of people and agencies in the planning process, and the institute was attended by more people than originally envisioned. The actual number of participants (72) was very close to projections for multiple institutes. It became somewhat of a community happening and seemed to reinvigorate the desire for the family-centered approach around the state. The strong collaboration among diverse groups serving families with young children with special needs, the emerging commitments for partnership, and the many requests for additional training demonstrated the success of the institute. A direct result of the Institute was the request from the Children's Medical Services for 3 regional trainings based on the Institute material.

EVALUATION

Originally, the Project Ta-kós evaluation plan was designed to examine the impact of project training and consultation activities on all facets of the project model. Specifically, we wanted to evaluate the impact of project activities on: 1. attainment of family-centered practices, 2. individual and program competence in the family-centered curriculum content, 3. improved intervention with families, 4. attitude changes resulting from component training, and, 5. increased collaboration among community groups to improve and coordinate services for families. While these impacts remained important to the project, the changes in our model caused us to rethink our evaluation activities. The following paragraph briefly explains why and how our model evolved. The Description of The Model section contains a more detailed explanation.

At the beginning of the project, as we began working with sites, we learned that state level initiatives and program needs had changed since the inception of the project. We also learned that our model was too static and needed to become more responsive to site-specific needs. T o insure that our training activities were germane, we developed outcomes with site participants to create a better fit between our materials/expertise and the realities of the participants' workplace. Our initial activity was to assess concerns, priorities and strengths with sites in order to develop mutually determined inservice training outcomes, thus modeling the IFSP process. One aspect of evaluation then, focused on the extent to which these outcomes were achieved. In all cases participants indicated that the outcomes were successfully achieved. Two sites requested new outcomes to be developed as our work together lead to increased awareness of needs. Another question was to determine if participants believed our approach was valuable.

As for our project, objectives we re-focused our evaluation to immediate and short-term outcomes that would guide us as we evolved our model. These outcomes are identified in the Project Ta-kós Evaluation Plan, which is found in Appendix B. These outcomes were realized through developing methods that: 1) increased participants' input in planning of their training events, 2) community-based technical assistance, 3) participant feedback and 4) dissemination of project concepts across various levels (i.e. individual specific, committees, state initiatives). The success of these activities is described in the Project Impact section.

Project Ta-kós also evaluated the extent to which training and consultation using the

curriculum components was effective in meeting the needs of individuals working in early childhood settings. We were interested in how well we responded to needs and what impact participants perceived. This interest took on increasing importance as the data influenced our model expansion. One way in which this was assessed was through on-going trainee satisfaction with the consultation and trainings. Another was to conduct follow-up surveys to learn the degree to which participants were meeting the objectives they identified.

Table 4 lists the programs where individuals completed the Project Ta-kós Evaluation Form and where more in-depth workshops were conducted. (The Evaluation Forms are found in Appendix B). Each person was asked to rate the quality and effectiveness of the workshops. In some cases, the workshops were conducted over time, thus the participants completed more than one form. Other workshops were conducted in intensive one-to-three day sessions. In both cases, the information was used to guide project staff in making changes to improve the workshops and facilitate positive relationships with the sites.

The evaluation form included questions about *content*, or the degree to which individuals thought the objectives were met, the materials were valuable and important concepts were discussed; the *process* or the degree to which the presenters used interactive methods, used time well, and responded to questions; and *application* or the degree to which the workshop facilitated opportunities to apply the content to their situations. The evaluations were either on a three-point or a five-point rating scale. The content questions were measured using 3 (or 5) = good to 1 = not at all, the process questions used 3 (or 5) = good to 1 = poor as indicators and the application questions were measured using 3 (or 5) = many to1 = none.

The individuals who completed the form included teachers, early interventionists, service coordinators, parents, administrators and ancillary staff. All were either working with or living with a young child, birth to age eight with developmental delays and were participating in programs that provided early intervention, health care, or education and related services.

By looking at the average ratings, the table shows that participants consistently rated the workshops high in all areas. In fact, there is an overall increase in the ratings over time, that may indicate that our training became more applicable and meaningful. The following comment typifies the input we received from staff after changing our approach.

Table 4 - Training Evaluations: Mean Quality/Effectiveness Ratings

Program/Event (n)[1]	Content[2]	Process[3]	Application[4]	Recommend[5]	Overall [6]
CMS Public Health Regional Workshops (n=27) 97	4.44	4.36	4.45	4.91	8.29
PRO/Ta-kós Institute (n=34) 8/96	2.71	2.77	2.43	2.83	N/A
NMSDE, NMDOH, Project Ta-kós regional Transition Workshops 1996-97 (n=135)	2.89	2.91	2.93	N/A	2.72
APS Family-Centered (5/96) n=32	2.73	2.94	2.36	N/A	3
NM School for the Deaf					
IFSP 10/95 n=28	2.78	2.89	N/A	N/A	2.92
Family-Centered 3/96 n=16	2.56	2.57	2.41	N/A	2.75
cultural diversity 11/96 n=15	2.55	2.48	2.14	2.67	N/A
Gallup McKinley County					
Teams (5/95) n=22	2.86	2.87	N/A	N/A	2.91
Transition (11/96) n=12	2.81	2.83	2.33	N/A	2.92

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[1] (n) represents the number of people who completed the evaluation forms

[2] These ratings are based on a three-point rating scale where 3=very to 1=not at all with the exception of CMS where a five-point rating scale was used were 3=very to 1=not at all.

[3] These ratings are based on a three-point rating scale where 3=good to 1=poor with the exception of CMS where a five-point rating scale was used were 3=good to 1=poor.

[4] These ratings are based on a three-point rating scale where 3=many to 1=none with the exception of CMS where a five-point rating scale was used were 3=many to 1=none.

[5] The tabled value is based on a three-point rating scale where 3=recommend the workshop to others to 1= would not recommend the workshop to others except for CMS where a five-point scale is used where 3=recommend the workshop to others to 1= would not recommend the workshop to others.

[6] Overall ratings were based on a ten point scale where 1=poor, 5=good & 10=excellent for the CMS training and a three-point scale for where 3=good, 2=adequate, 1= poor very somewhat not at all for the other workshops.

It is imperative that I stress the most critical function and most dynamic asset Project Ta-kós delivers. In my experience as both a therapist and a program director, I have had many opportunities to audience "expert" theories and priorities. Seldom have they truly addressed what my intervention, therapy or programs development needs really were. Project Ta-kós is one of the few agencies who allows the program staff to which they are presenting to precisely dictate the topics to be covered, the questions to be answered, etc.

Early Intervention Program Director and Participant

The overall ratings indicate that participants found the workshops effective in meeting the needs of individuals working in the listed programs.

Since the transition trainings required community teams to form and develop a planning process, we conducted follow-up surveys to determine long range impact. Specifically, we wanted to learn the degree to which the community teams became viable teams in improving the transition process in their community. The survey was sent to each team. They were asked to arrive at a team consensus on the questions. Questions were asked to determine the composition of the team and the number of times the teams had met since the last workshop and when they planned to meet again. We also asked open-ended questions about application of the workshop content, what their group was working towards and what challenges they had encountered.

During the 1995-96 school year ten teams have returned the survey. Of those ten, nine had met at least once since the workshop and five teams had met twice. Seven of the teams were represented by all the key stakeholders in their community. Comments of participants included:

* *We got much more information sharing and understanding of each other's programs. There is a possible development of a transitioning joint powers agreement between agencies.*
* *Part H and Part B are both working from the same basic foundation of knowledge.*

Teams reported on the goals they'd developed as a result of the workshop. These included:

* *Joint powers agreement between early care, Head Start and public schools: getting to know other agencies like the back of our hand!*
* *Common transition statements and best practices*
* *Our main goal was to open communication and develop a plan that is followed by*

both Part H and Part B.

The evaluations for the institute were rated in the same areas: content, process and application. Application ratings reflected the degree to which the institute facilitated opportunities to apply the content and relate content to real situations. A three-point scale was used to measure quality and effectiveness. The content questions were measured using 3 = very to 1 = not at all, the process questions used 3 = good to 1 = poor as indicators and the application questions were measured using 3 = many to 1 = none. Application was rated by separate questions for each session while the content and process were rated overall.

The participants were asked if they were a family member of a child with special needs (12 said yes), if they were a service provider (28 said yes), if they were an administrator (5 said yes). Another question asked for other areas. Two were students, one an educator, two listed teacher and two listed service coordinator. Table 4 shows the average ratings for each area and the over all ratings, indicating that the institute was effective in meeting the needs of individuals. We were interested in whether the participants believed they would apply the content information when they returned home. 97.6% of the participates indicated that they had some or many new ideas about directions to take when they returned home and had practical ideas to use in their program. Overall, 97.5% of the respondents placed positive value on the institute for its structure, content and usefulness to themselves and usefulness for their program.

IMPACT

The multi-faceted approach of Project Ta-kós enabled the project to impact service provision at many levels. Over 2,400 participants in conferences, trainings, and technical assistance activities were reached. Staff participation on New Mexico Interagency Coordinating Council committees and personnel training initiatives infused family-centered practices into policy and procedures for lasting impact. Through these activities, every family in New Mexico with a child with special needs birth through eight years of age had the opportunity to benefit from improved family-centered services.

Project staff gave 24 conference presentations including New Mexico state-wide and regional conferences, conferences in adjoining states, and nationally (National Association for the Care of Children Health, International Parent to Parent, and a poster session at DEC). Summary of Curriculum Component Training (Table 3) lists all presentations. Session evaluations indicated increased understanding of topics in all cases. Requests for more information and training demonstrated that the information presented was going to be used. Quotes from conference evaluations included the following comments:

> *Usable information.*
> *I was inspired and intend to think carefully about what you said and do what I can to implement family-centered principles with staff.*
> *Important, thought provoking.*
> *New visions.*
> *Well worth my time!!! Much information not new, but so important to be reminded because attitudes about families become skewed in school settings.*

The three day institute, Implementing Family-Centered Practices In My Work, was successfully co-sponsored by Project Ta-kós and Parents Reaching Out. Fifteen diverse agencies and 72 participants, all who work with young children, came together to share expertise and make this a part of their staff development. Many new partnerships flourished. A newly formed hospital advisory committee from Colorado participated, and returned home with common vision and a sense of being a team.

> *Going to Glorieta as a parent gave me the opportunity to connect with professionals on an equal basis. The exchange was mutual, and I left feeling like I made valuable contributions to the ways in which professionals interact with families.*
>
> Parent/Presenter

Building communities' capacity for sustaining family-centered services was a big part of what Project Ta-kós did and perhaps was the impact of greatest significance. The opportunity to help shape training from the State Department of Education and State Department of Health ensured that training was based on strengths present in each community. The project co-sponsored eight, two day planning sessions, where 26 communities formed teams and developed transition planning processes. This quote summarizes the most commonly stated valuable aspect of the sessions.

> *What was most useful was meeting the public school in our district and actually developing a plan for our district.*

An unexpected theme expressed by many communities was that of hope.

> *That we can improve our system of transitions.*
> *Everyone is actually trying to improve the system.*

In McKinley County the project provided training and technical assistance to several agencies, establishing trusting relationships which enabled staff to address some of the community wide issues affecting children. At the request of the community and with facilitation by project staff, the Interagency Coordinating Council for Transition was born and continues to function today, even though project staff now provide only indirect support. Several jurisdictional issues were resolved and they achieved their first major goal, the design and use of a common in-take form. This was a development long requested by area families.

The impact of project activities on individual sites was often dramatic and characterized a major change. One program director after a long struggle, expressed it this way: *"We are a Team!"* This same program director told us that we had helped them set a foundation for their team for defining their vision/mission as a group. She believes that the project's mediation/facilitation allowed the groups to define their personal and professional beliefs about family-centered practices. After a community-wide, cross-agency training, another reported:

> *Social Workers are referring more families - providers used to see us as competitors.*

A kindergarten teacher seemed amazed as she exclaimed:

> *I didn't know I could talk with a Head Start teacher!*

The development of Infusing Family-Centered Practices Into Agency Administration has enormous potential for impact on the field of early intervention and education for children with disabilities and their families. The interest in the ideas and strategies included in the workbook

has grown very fast. Creating agencies which support the provision of family-centered services is especially critical in today's time of cutbacks and these ideas are clearly what many administrators are looking for. One agency reports that they have used the workbook in team discussions to define family-centered practices into their agency operations. (See Objective 6 in Description of Model for dissemination numbers).

The model for working with training sites which Project Ta-kós has developed can be very useful for professionals providing inservice training. By focusing on jointly developed outcomes, assistance becomes strengths-based, and ultimately, more beneficial for communities.

The project utilized a variety of means for dissemination of products and ideas. The purpose was always to ultimately improve services for children and families. The many requests for information and products, along with training and technical assistance, which grew from dissemination activities indicates that there activities were successful. The use of Project Ta-kós materials by other professionals, as well as in regional faculty institutes, effectively extends dissemination beyond our own audiences. (See Objective 12 in Dissemination of Model for dissemination numbers).

Alta Mira will make available five products after the project ends.

- Infusing Family-Centered Concepts Into Agency Administration

  Patricia Parham, & Patricia McMahon (1994). This brief but significant manual offers information intended to facilitate the use of family-centered principles within and across agencies. Its format is straightforward, offering information about the aspect of administration (e.g., governing board), providing questions about how families are (or could be) involved in that aspect of administration, and offering examples from practice when possible. The questions could easily form the core of a team-based decision-making activity, with an accompanying plan of action or change.

- Another Way to View Child Development

  Betty Yoches, & Magarita Luera (1990). This component shares information about the early development of the sensory and communication systems as well as the role temperament plays in early childhood development. Through lecture, self-awareness, and problem-solving activities, participants gain knowledge about the function of these systems, and how they impact on the child's growth and development. A primary focus of the training is on the roles the adult takes in interpreting the needs of the child, and supporting the child's development.

- Understanding Family Uniqueness through Cultural Diversity

  Margarita Luera (1994). The Project Ta-kós approach to training cultural sensitivity to diversity is based on each participant identifying their own unique culture beginning with their family of origin's culture. The materials are designed to be used as a four workshop sequence: "Self-awareness," "Cultural Exclusiveness," and "Consciousness Raising" are completed in the first workshop; "Heightened Awareness" in the second workshop; "Over-emphasis" in the third workshop; and "Integration and Balance" in the fourth and final workshop. Each component builds on the previous component. The user's guide specifies that while someone facilitating a workshop with these materials does not need to be a cultural expert, they must be very familiar with the materials.

- Cultural Respect: The Base for Family / Professional Collaboration

  Cindy Faris (July 1996). A basic theme is the importance of considering each family as a culturally unique entity; we should not assume that any family is the same just because they are from a particular background. Relationships based on respect are key in working with families and children.

- A Family's Role in Assessment

  Cindy Faris (July 1997). This is a review of current literature concerning the family's role in assessment. We all come from families that form the basis of who we are and we cannot be separated so easily from this culture and heritage. When a family understands and supports the programs working with their child, change and results that benefit the child are much more likely to occur.

To order any of the products listed above, please contact Alta Mira Specialized Family Services, Inc. at (505) 262-0801, fax number (505) 262-0845 or 1605 Carlisle Blvd. NE, Albuquerque, NM 87110.

FUTURE ACTIVITIES

Alta Mira Specialized Family Services has committed to continue to distribute the Project Ta-kós materials. See the Impact section for a list of materials.

Alta Mira has submitted Project Ta-kós training materials as a base for family-centered training in an agency proposal for an Early Start grant. If this proposal is funded, Project Ta-kós materials would be used for training for Early Start personnel in three countries of New Mexico.

ASSURANCE STATEMENT

Copies of the full final report for Project Ta-kós Outreach have been sent to the following individuals / offices:

- Ms. Mary Vest at OSEP (3) and
- ERIC / OSEP Special Project.

The title page and abstract for Project Ta-kós Outreach's Final Report have been sent to the following programs:

- NEC*TAS
- National Clearinghouse for Professions in Special Education at CEC
- NICHCY
- TAPP
- National Diffusion Network
- CASSP
- Northeast Regional Resource Center
- Mid South Regional Resource Center
- South Atlantic Regional Resource Center
- Great Lake Area Regional Resource Center
- Mountain Plains Regional Resource Center
- Western Regional Resource Center
- Federal Regional Resource Center

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APPENDIX A

General

1) **Family-Centered Curriculum Components - Summary**

   Understanding Family Uniqueness Through Cultural Diversity

   Another Way to View Child Development: An Interactive Approach to the Integration of the Sensorimotor System, Communication, and Temperament

   Infusing Family-Centered Practices into Agency Administration

2) **Selection Criteria for Outreach**

UNDERSTANDING FAMILY UNIQUENESS THROUGH CULTURAL DIVERSITY

PURPOSE: The purpose of this component is to understand: the roles culture plays in interpersonal dynamics; how adults blend to form unique family life-ways; and how a family arrives at appropriate intervention techniques and activities.

BENEFIT: Participants will explore what each family brings from the past and adapts from the present. This component will create an awareness of how to determine a goodness-of-fit between the intervention plan, the family's life-ways, and the child's needs.

TARGET AUDIENCE: Administrators, Teachers, Parents, Medical Staff, Therapists

FORMAT: Each workshop is distinct. All are interactive. Discussion, mini-lecture, large and small group activities, self-awareness activities, ethnographic observation skills, ethnographic interviewing skills, and audio-visual aids are used to assist in building skills to reach the Balance and Integration Stage of cultural sensitivity.

COMPETENCIES:

1. Participants will give examples of how they have experienced the salient features of culture.
2. Participants will identify aspects of the culture of their family of origin.
3. Participants will give examples of family strengths based on "Family Living: A Cultural Inventory."
4. Participants will name some of the positive and negative aspects of ethnocentrism.
5. Participants will name the micro cultures that make up their current, unique culture.
6. Participants will give examples of the role culture plays in each individual life/family.

7. Participants will demonstrate knowledge of other life-ways being parallel to their own life-ways.

8. Participants will identify their values and beliefs and how these influence their interactions with others.

9. Participants will describe how to negotiate with a family when they are at opposite poles in their values or beliefs to arrive at neutral strategies to the family's satisfaction.

10. Participants will describe other cultures in terms of their structure and form as a means to group survival.

11. Participants will demonstrate basic ethnographic observation skills.

12. Participants will explain how to use the information gleaned from ethnographic observation to formulate questions to begin ethnographic interviewing.

13. Participants will give examples of the "falling in love" stage of another life-way.

14. Participants will give examples of the burden of culture.

15. Participants will demonstrate "Good Questions" (C.O.N.S.).

16. Participants will demonstrate ethnographic interviewing skills.

17. Participants will identify a family's values and belief system to find out what is meaningful and appropriate for that family.

18. Participants will demonstrate cultural relativity (the belief that there are many cultural life-ways that are correct each in its own location and context), by accepting and using those life-ways when interacting with families.

19. Participants will seek a "cultural guide" when working with a family from a different culture and the "cultural guide" could be one of those family members.

TIME: The self-awareness workshop runs four to five hours depending on participant needs. The additional three workshops range from four-to-six hours per session.

The four-part workshop series, four to six hours per session, depending on participant needs.

WHERE: Training will occur at the local school or program site.

WHEN: It is advisable to begin early in the program year. This workshop series is a process that calls for training and time to experience the concepts presented in the workshop format. A span of two to four weeks is required between sessions for participants to explore and practice concepts before continuing to build on them in the subsequent workshop.

FOR INFORMATION ON SPECIFIC DETAILS FOR YOUR PROGRAM, CONTACT:

Project Ta-kós
Alta Mira Specialized Family Services, Inc.
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ANOTHER WAY TO VIEW CHILD DEVELOPMENT: AN INTERACTIVE APPROACH TO THE INTEGRATION OF THE SENSORIMOTOR SYSTEM, COMMUNICATION, AND TEMPERAMENT

PURPOSE: The purpose of this component is to assist parents and professionals in understanding how the child's temperament, and sensorimotor and communication systems support each other in helping the child develop a solid foundation for normal growth and development.

BENEFIT: A primary focus of training is on the roles the adult takes in supporting the child's development. Awareness of the interaction and integration of these systems leads to more appropriate interpretation of the child's developmental needs by parents, teachers and other caregivers. This understanding leads to a better "goodness of fit" of how the child and adult respond to each other, therefore enhancing the child's development.

TARGET AUDIENCE: Educational Personnel, Health Care Professionals, Parents with Young Children

FORMAT: Each workshop in the series is interactive. They include discussion, mini-lecture, small and large group participation, self-awareness and problem-solving activities, and audio-visual aides.

COMPETENCIES:

1. Participants will describe the functions of the sensory system.
2. Participants will describe functions of tactile system, vestibular system, and proprioceptive system.
3. Participants will explain how the sensory subsystems interact, support, and enhance each other's qualities.
4. Participants will describe how new patterns of movement are derived from innate and previously learned skills.
5. Participants will describe the progression of sensory integration.

6. Participants will explain the function of Baby Talk.

7. Participants will describe how infants regulate communicative interactions.

8. Participants will state the four primary functions of language.

9. Participants will compare infant language development to toddler language development.

10. Participants will interpret toddler grammar in order to model appropriate grammar back to the toddler.

11. Participants will compare three-year-old communication skills to four-and five-year-old communication skills.

12. Participants will describe their own temperament styles.

13. Participants will state the qualities of temperament.

14. Participants will label the adult's temperament style and the child's temperament style within an interaction.

15. Participants will examine the "goodness-of-fit" of temperament styles between the adult and child.

16. Participants will select adult behaviors that will promote "goodness-of-fit" between adult and child.

17. Participants will explain the functions of arousal and self-regulation.

18. Participants will identify calming and alerting activities.

19. Participants will describe the "Beliefs of the Extended Matrix Model."

20. Participants will label the levels of the Matrix Progression.

21. Participants can describe the functions of each level of the progression.

22. Participants will identify what the child needs at a given level of development.

23. Participants will create an environment that supports the child at that level of development.

TIME: The workshop series is comprised of (4) four hour sessions.

WHERE: Local school or program site.

WHEN: The workshop series may be given at any time, but may be most beneficial if it begins early in the program year. This allows the participants the opportunity to build on the concepts throughout the year, and apply them to the children with whom they work or live.

FOR MORE INFORMATION ON SPECIFIC DETAILS FOR YOUR PROGRAM, PLEASE CONTACT:

Project Ta-kós
Alta Mira Specialized Family Services
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INFUSING FAMILY-CENTERED PRACTICES INTO AGENCY ADMINISTRATION

Written by
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and
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Revised by
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Infusing Family-Centered Concepts Into Agency Administration

Purpose: The purpose of this component is to assist policy makers in understanding the vital role they must play in the emergence and growth of a family-centered agency. Becoming family-centered demands internal agency change as well as programmatic change which can only be initiated at the policy/administrative level.

Benefit: Participants explore the relationships of family-centered principles to management theory and practice. A system for ongoing review and suggestions on the change process are included for agency mission, governance, development, operations, policy and personnel, evaluation, staff development and community relationships.

REACHING FOR THE DREAM

This manual began as the dream of an administrator, Pat McMahon, executive director of Alta Mira Specialized Family Services, 1979 to 1993, to see family-centered principles at work in every level of community programs. The 1996 editors would like to dedicate this revision of "Infusing Family-Centered Practices Into Agency Administration" to Pat and her dream.

> "The term family-centered refers to a combination of beliefs and practices that define particular ways of working with families, that are consumer-driven and competency enhancing."
>
> Dunst, Johanson, Trivette & Hamby; 1991

A review of the literature reveals three major principles of family-centered practice that are believed to encompass current values and practice: (a) establishing the family as the focus of services, (b) supporting and respecting family decision-making, and (c) providing intervention services designed to strengthen family functioning. Families are identified as the source most qualified to evaluate the effectiveness of programs. (McBride, Brotherson, Joaning, Whiddon, Demmitt, 1993).

GOAL: The goal of this manual is to explore the impact of family-centered principles on the administration and management of agencies.

ISSUE AND RATIONALE: As a family-centered approach is implemented in direct services, progressive agencies model the concepts for staff, much as staff model them for families with whom they work. The philosophical underpinnings of evolving into a family-centered agency have broad implications for the management and administration of agencies serving families and young children with special needs.

OBJECTIVES:

1. Explore the relationship between family-centered principles and sound principles of management and administration.
2. Provide a framework for examining the extent to which agencies are family-centered.
3. Identify opportunities to model family-centered concepts in agency operations.

The premise of this manual is that program administrators, as well as service providers, must practice what we preach! The true test of an agency's commitment to a family-centered service philosophy lies in its willingness to define that philosophy in terms of operating procedures and then to implement it.

Selection Criteria for Outreach

Agencies selected for outreach assistance and replication preparation must meet the following criteria:

a) the target agency should provide a quality program (i.e., adequate staff, facility, etc.) for young children and meet state approved day care standards, public schools accreditation standards, or state health care standards;

b) the target agency's funding base should be stable;

c) the target agency should demonstrate a firm commitment to the concept of least restrictive environment and agree to adopt the elements of the Project Ta-kós curriculum;

d) the target agency should demonstrate a firm commitment to the idea of interagency collaboration;

e) the target agency will commit staff, time, and resources toward training in Project Ta-kós;

f) the target agency will participate in all evaluation efforts undertaken by Project Ta-kós.

The criteria established for initiating a relationship with an agency and providing outreach assistance will be applied flexibly in cases where there are substantial numbers of unserved children with special needs from 0-8 or where an agency demonstrates both a commitment and the potential to improve its present delivery of services.

APPENDIX B

Evaluation Materials

1) **Project Ta-kós Evaluation Plan**

2) **Project Ta-kós Workshop Evaluation**

3) **Implementing Family-Centered Practices in My Work Institute Evaluation**

4) **Implementing Family-Centered Practices in My Work Session Evaluation**

5) **Transition Survey**

PROJECT TA-KÓS EVALUATION PLAN

			Outcomes		
Goals	**Resources**	**Activities**	**Immediate**	**Intermediate**	**Longer-Term**
1. Create common bonds to enhance the quality of life for parents, children, families, and providers by increasing: *Open communication *Exchange of information *Utilization of both family and provider expertise 2. Influence service delivery, policy development, and accessibility of services by: *Developing and disseminating information	*Training materials *Diverse staff *Access sites *Part H 619 *Library *Cross-cultural contacts *Staff development *PRO / family liaisons *Diverse staff *Supplies *UNM and UAP *Goodwill *National network *State parent network *Staff "double loop" *Alta Mira community program	1. Ongoing interview and assessment of participants' needs 2. Facilitated learning experiences *Communication *Training/consulting *Facilitating/coaching *Modeling 3. Structuring experiences *Follow up consultation *Structure system interactions 4. Family participation as parents and experts 5. Participation on state-level committees and activities 6. Ongoing evaluation of the content of Project Ta-kós 7. Materials development and dissemination 8. Technical Assistance	1. Participants perceive Ta-kós activities as: *Useful/meaningful 2. Participants learn new information 3. Participants acquire a greater awarentess of where the program needs to go next 4. Participants acquire a greater awareness of their perceptions and values and how this impacts others 5. Participants become more aware of resources/contacts within their program and/or the community 6. Parents, staff, and administrators are integrated into all activities 7. Increased number of contacts with Project Ta-kós 8. Increased understanding of how to work with families	1. Use some aspects of the Ta-kós model in daily activities 2. Take some action on where their program needs to go next 3. Change in individual and system philosophy and practices **Interaction/Collaboration** 4. Increase in extent to which staff/agencies work together 5. Increase in the extent to which parents and staff/agencies work together 6. Staff perceive parents as essential participants and experts **Other** 7. Increase in the number of future requests for making contacts 8. Assessment of Project Ta-kós content 9. Ta-kós materials are perceived as useful	1. Interagency agreement 2. Change in individual and system philosophy and practices 3. Increase in the hiring of parents as experts 4. Increase in the participation of parents 5. Assessment of Project Ta-kós content 6. Dissemination of information

Workshop Name _____ Location (Agency/City/State) _____ Date _____

PROJECT TA-KÓS WORKSHOP EVALUATION

A. Workshop Evaluation

	Very	Somewhat	Not at all
1. The workshop objectives were clear.	___	_____	____
3. The information was useful for *me*.	___	_____	____
4. The information was useful for *our program*.	___	_____	____
5. The handouts were useful.	___	_____	____

	Good	Adequate	Poor
7. The organization of the workshop was:	___	_____	___
8. The amount of involvement (e.g., sharing ideas and experiences) of participants was:	___	_____	___
9. Overall, the workshop was:	___	_____	___

B. As a result of this workshop:

	Many	Some	None
1. Did you learn new information or ideas?	____	___	___
2. Do you have new ideas about directions you would like your program to take?	____	___	___

	Very	Somewhat	Not at all
3. Are you more aware of others (e.g., parents, other staff, community resources) who are important to your work?	___	_____	____
4. Are you more aware of how peoples' values (e.g., beliefs, world views, perceptions) affect your work?	___	_____	____

C. Do you want more information on the topics that were covered in this workshop?
___ No ___ Yes (please describe)_____
_____

D. What was the most useful information or idea in this workshop?_____
_____

E. What did you like best about this workshop?_____
_____

F. How could we improve this workshop?_____
_____

G. Other comments?_____
_____

Please check all that apply:

_____
Location (Agency/City/State)

Are you a family member of a child with special needs? Yes___ No___
Are you a service provider? Yes___ No___
Are you an administrator? Yes___ No___
Other (please specify)_____

IMPLEMENTING FAMILY-CENTERED PRACTICES IN MY WORK

A. Institute Evaluation. Please express your opinions of the entire Institute by checking the most appropriate column.

	Very	Somewhat	Not at all
1. The institute objectives were clear.	____	_____	_____
2. The information was useful for *me*.	____	_____	_____
3. The information was useful for *my program*.	____	_____	_____
4. The materials were useful.	____	_____	_____
	Good	**Adequate**	**Poor**
5. The organization of the institute was:	____	_____	____
6. The amount of involvement (e.g., sharing ideas and experiences) of participants was:	____	_____	____
7. Overall, the institute was:	____	_____	____

B. Sessions Evaluation. We are interested in your opinions about what you gained as a result of participating in each of the five sessions. Please take a moment to evaluate *each session* by checking the most appropriate column for each question.

Session 1: Viewing the World from a Family Centered Perspective
Jennifer Thorne-Lehman & Tony Husted

	Many	Some	None
1. Do you have new ideas about directions you would like your *program* to take?	____	____	____
2. Do *you* have practical ideas to *use* when you return home?	____	____	____
	Very	**Somewhat**	**Not at all**
3. Are you more aware of the importance of acknowledging families' competence?	____	_____	_____
4. Are you more aware of the benefits of including families as full partners?	____	_____	_____
5. Are you more aware of the difference between service delivery as driven by a system versus by family priorities?	____	_____	_____

Session 2: Supporting the Family in Your System
Tanya Baker-McCue, Tony Husted, Debra Garcia, Jean Bury, Cindy Sotelo, Jeanetta Gabaldon & Cindy Faris

	Many	Some	None
1. Do you have new ideas about directions you would like your *program* to take?	____	____	____
2. Do *you* have practical ideas to *use* when you return home?	____	____	____

	Very	Somewhat	Not at all
3. Are you more competent in identifying families' strengths?	____	____	____
4. Are you more aware of the elements that make up family support?	____	____	____
5. Do you have a better understanding of how to develop family-professional partnerships?	____	____	____

Session 3: How Can I Be a System When There is Only Me? Strategizing Together for Positive Action
Linda Askew & Mary Bolton-Koppenhaver

	Many	Some	None
1. Do you have new ideas about where you can influence system change?	____	____	____
2. Do you have practical ideas about how you can make a difference?	____	____	____

	Very	Somewhat	Not at all
3. Are you more aware of the usefulness of systems thinking?	____	____	____

Session 4: The Power of Networking
Leau Phillips & Christy Barden

	Many	Some	None
1. Do you have new ideas about directions your *program* could take to enhance networking?	____	____	____
2. Do you have practical ideas that you can *use* to access resources?	____	____	____

	Very	Somewhat	Not at all
3. Are you more aware of the usefulness of collaboration within and among agencies?	____	____	____
4. Are you more aware of the usefulness of families collaborating with each other?	____	____	____

Session 5: Strategies for Enhancing Service Delivery
Ruth Baldwin, Manuel Green & Cindy Faris

	Many	Some	None
1. Do you have new ideas about directions you would like your *program* to take?	____	____	____
2. Do you have practical ideas about steps you can take to implement family centered practices?	____	____	____

Implementing Family-Centered Practices in My Work

Session Evaluation

Friday, June 27, 1997
UNM-Gallup Branch, Gurley Hall, Room B207
Gallup, NM

	Not at all		Some Extent		Great Extent
1. How well:					
- did you understand the topic **before** the session?	1	2	3	4	5
- do you understand the topic **after** the session?	1	2	3	4	5
2. To what extent:					
- was the material well-presented?	1	2	3	4	5
- was the content useful to you?	1	2	3	4	5
- were the videotape vignettes useful?	1	2	3	4	5
- would you recommend this session to others?	1	2	3	4	5
3. As a result of this session, to what extent do you feel you:					
- understand the principles for delivering family-centered services	1	2	3	4	5
- can apply the principles to practice	1	2	3	4	5
- are more aware of others (e.g., parents, other staff, community resources) who are important to your work?	1	2	3	4	5
- are more aware of how peoples' values (e.g., beliefs, world views, perceptions) affect your work?	1	2	3	4	5

4. Overall, how would you rate this session?

Poor				Good				Excellent	
1	2	3	4	5	6	7	8	9	10

5. What did you find most useful about the session? _____

_____

_____

6. What would you suggest to improve the presentation? _____

_____

_____

7. Please offer any additional comments on the back of this form.

Thank you!

Transition Survey

General (please circle the appropriate answer):

1. How many times has your community-based group met since the transition workshop?

   0 1 2 3 4 . 5

2. Who took part in these meeting(s)? (Circle all that apply.)

   Parents LEA Part H Head Start CMS

   Other: _____

   _____

3. Do you have your next meeting/activity planned? yes no

   If yes, when? _____

4. Has your group specified a contact person? yes no

   If yes: Name

   Address

   Phone

To the best of the group's ability, please respond to the following:

5. What has changed as a result of the transition workshop?

6. What facilitated these changes?

7. What is your group working towards?

8. What challenges have you encountered in meeting your transition goals in your community?

9. Based on this experience, what would you recommend to other communities who are working on improving the transition process?

10. Other comments you wish to share.

11. Does your group have family (other than a Family Liason) participation? If so, how many?

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12. If your group does not have family/parent participation, do you have a plan to recruit families/parents to participate?